

1 SENATE BILL 1179

2 **48TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2007**

3 INTRODUCED BY

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8 FOR THE WELFARE REFORM OVERSIGHT COMMITTEE

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10 AN ACT

11 RELATING TO HEALTH; GRANTING THE INTERAGENCY BEHAVIORAL HEALTH
12 PURCHASING COLLABORATIVE RULEMAKING AUTHORITY.

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14 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

15 Section 1. Section 9-7-6.4 NMSA 1978 (being Laws 2004,
16 Chapter 46, Section 8) is amended to read:

17 "9-7-6.4. INTERAGENCY BEHAVIORAL HEALTH PURCHASING
18 COLLABORATIVE.--

19 A. There is created the "interagency behavioral
20 health purchasing collaborative", consisting of the secretaries
21 of aging and long-term services, Indian affairs, human
22 services, health, corrections, children, youth and families,
23 finance and administration, labor, public education and
24 transportation; the directors of [~~the state agency on aging~~]
25 the administrative office of the courts, [~~the New Mexico office~~

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1 ~~of Indian affairs]~~ the New Mexico mortgage finance authority,
2 the governor's ~~[committee on concerns of the handicapped]~~
3 commission on disability, the developmental disabilities
4 planning council, the vocational rehabilitation division of the
5 public education department and the New Mexico health policy
6 commission; and the governor's health policy coordinator, or
7 their designees. The collaborative shall be chaired by the
8 secretary of human services with the respective secretaries of
9 health and children, youth and families alternating annually as
10 co-chairs.

11 B. The collaborative shall meet regularly and at
12 the call of either co-chair and shall:

13 (1) identify behavioral health needs
14 statewide, with an emphasis on that hiatus between needs and
15 services set forth in the department of health's gap analysis
16 and in on-going needs assessments, and develop a master plan
17 for statewide delivery of services;

18 (2) give special attention to regional
19 differences, including cultural, rural, frontier, urban and
20 border issues;

21 (3) inventory all expenditures for behavioral
22 health, including mental health and substance abuse;

23 (4) plan, design and direct a statewide
24 behavioral health system, ensuring both availability of
25 services and efficient use of all behavioral health funding,

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1 taking into consideration funding appropriated to specific
2 affected departments; and

3 (5) contract for operation of one or more
4 behavioral health entities to ensure availability of services
5 throughout the state.

6 C. The plan for delivery of behavioral health
7 services shall include specific service plans to address the
8 needs of infants, children, adolescents, adults and seniors, as
9 well as to address workforce development and retention and
10 quality improvement issues. The plan shall be revised every
11 two years and shall be adopted by the department of health as
12 part of the statewide health plan.

13 D. The plan shall take the following principles
14 into consideration, to the extent practicable and within
15 available resources:

16 (1) services should be individually centered
17 and family focused based on principles of individual capacity
18 for recovery and resiliency;

19 (2) services should be delivered in a
20 culturally responsive manner in a home or community-based
21 setting, where possible;

22 (3) services should be delivered in the least
23 restrictive and most appropriate manner;

24 (4) individualized service planning and case
25 management should take into consideration individual and family

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1 circumstances, abilities and strengths and be accomplished in
2 consultation with appropriate family, caregivers and other
3 persons critical to the individual's life and well-being;

4 (5) services should be coordinated,
5 accessible, accountable and of high quality;

6 (6) services should be directed by the
7 individual or family served to the extent possible;

8 (7) services may be consumer or family
9 provided, as defined by the collaborative;

10 (8) services should include behavioral health
11 promotion, prevention, early intervention, treatment and
12 community support; and

13 (9) services should consider regional
14 differences, including cultural, rural, frontier, urban and
15 border issues.

16 E. The collaborative shall make rules regarding
17 performance measures and standards of behavioral health service
18 providers, including an entity that administers the statewide
19 behavioral health system, and hold hearings to take formal
20 testimony of consumers about behavioral health provider
21 services. The hearings shall be held at least annually in each
22 quadrant of the state after posting a public notice of hearing
23 that lists the subject matter of the rule, the action proposed
24 to be taken, the time and place of the hearing, the manner in
25 which interested persons may present their views and the method

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1 by which copies of the proposed rule may be obtained. The
2 hearing date shall be published once at least thirty days prior
3 to the hearing date in a newspaper of general circulation and
4 mailed at least thirty days prior to the hearing date to all
5 persons who have made a written request for advance notice of
6 hearing. All rules shall be filed in accordance with the State
7 Rules Act.

8 [E.] F. The collaborative shall seek and consider
9 suggestions of Native American representatives from Indian
10 nations, tribes, pueblos and the urban Indian population,
11 located wholly or partially within New Mexico, in the
12 development of the plan for delivery of behavioral health
13 services."

14 Section 2. REPEAL.--Section 9-7-6.3 NMSA 1978 (being Laws
15 1999, Chapter 270, Section 3) is repealed.

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